WIRE TRANSFER REQUEST FORM

Account Name Account Number City, State, Zip For Further Credit To (Third party/investment/final credit) Account Name: Account Name: Account/Escrow Number: Special Instructions or Additional Information: Wire Transfer requests must be received and verified by 12:00PM (Pacific Time) to be processed the same day within the United States. This AGREEMENT and PAYMENT ORDER is between F&A Federal Credit Union (the "Credit Union") and the undersigned member. The Credit Union is authorized to and directed to make the funds transfer and assess the fee in the amount set forth in the Schedule of Fees and Charges. You authorize us to electronically or otherwise record any telephone calls relating to any transfer under this agreement. F&A Federal Credit Union is not responsible for any loss or delay which may occur due to incomplete or incorrect information provided in this request or which may result by subsequent handling by any other party other than this Credit Union. This request cannot be revoked after wire transmission is								
To ensure timely and accurate processing please print clearly Amount to Transfer: Account Type: Cell Phone Number: Financial Institution Information Institution Name: 9 Digit ABA (Routing Number) Address City, State, Zip Credit to Account Name Account Name Account Number Account Name: City, State, Zip For Further Credit To (Third party/investment/final credit) Account Name: Account Name: Account State, Zip For Further Credit To (Third party/investment/final credit) Account State, Zip For Further Credit To (Third party/investment/final credit) Account State, Zip For Further Credit To (Third party/investment/final credit) Account State, Zip For Further Credit To (Third party/investment/final credit) Account State, Zip For Further Credit To (Third party/investment/final credit) Account State, Zip For Further Credit To (Third party/investment/final credit) Account State, Zip For Further Credit To (Third party/investment/final credit) Account State, Zip Account State, Zip For Further Credit To (Third party/investment/final credit) Account State, Zip For Further Credit To (Third party/investment/final credit) Account State, Zip Account State, Zip For Further Credit To (Third party/investment/final credit) Account State, Zip Account	Name and Address (as shown on acco	unt):						
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Institution Name: Address City, State, Zip Credit to Account Name Account Number Account Number Account Number Account Name Account Number City, State, Zip City, State, Zip City, State, Zip For Further Credit To (Third party/investment/final credit) Account Number Account Number Account Name: Account Name: Account Number: Account Number: Account Number: Special Instructions or Additional Information: Wire Transfer requests must be received and verified by 12,00PM (Pacific Time) to be processed the same day within the United States. This AGREEMENT and PaYMENT ORDER is between F&A Federal Credit Union (the "Credit Union") and the undersigned member. The Credit Union is the Additional Information: Account Number Account Number Account Number: Account Num	To ensure timely and accura	ate processin	g please print	t clearly	l	<u> </u>		
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Account/Escrow Number: Account/Escrount Account Account Account Account Account Account Account Accou	Address	City, State, Zip						
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Member/Joint Owner Signature (required) Member/Joint Owner Signature (required)	Wire Transfer requests must be received. This AGREEMENT and PAYMENT ORD authorized to and directed to make the to electronically or otherwise record ar F&A Federal Credit Union is not responsible. When you initiate a wire transfer, if you name and number, we and every receive payment, even if the number identifies identified by name. Neither we nor any identifying number refer to the same fit the beneficiary/designated recipient is Wire transfers are governed by Federal California Uniform Commercial Code. A Requests received by secure email, or delay in the transfer date. Please cont You understand that by signing below, agreeing to, and have read, the terms authorization to F & A Federal Credit I	ed and verified by ER is between F& e funds transfer and telephone calls asible for any loss of ing by any other par payment order in the form of the fundamental intermediate for the fundamental institution your responsibility. Reserve Regulation and in the form of the fundamental institution to the fundamental institution the fundamental institution in the form of the fundamental institution in the fundamental inst	A Federal Credit Und assess the fee in relating to any transor delay which may arty other than this dentifies an intermoral financial institution inancial institution or person. Any los y and not the Credon J if the transfer are subject to reviein person are subjion for restrictions ing to the terms of &A Federal Credit formation from yo	nion (the "Cred the amount se asfer under this coccur due to ir s Credit Union." ediate financial on may rely upo , person, or acc stitution have an ses resulting fro its Union's. is processed th w in accordance ect to review and s. this request (ii Union Electron our personal cres	It Union") and the under the forth in the Schedule of agreement. Incomplete or incorrect in this request cannot be in institution, beneficiary in the identifying number out different than the interpretation of the interp	ersigned member. of Fees and Charg information provice revoked after wire financial institution rather than the information institution whether the trumber, or your erve, and otherwise FAC Regulations. To processing and information is contact and (iv) providing the providing of the providing promation from Exp	The Credit Union is ges. You authorize us ded in this request or a transmission is on, or beneficiary by name to make on or beneficiary e name and misidentification of the by Article 4A of the d may result in a correct (iii) ag a written perian solely to	
	Member/Joint Owner Signature (rec	nuired)		Mamh	er/ Joint Owner Signatur	re (required)		

You must attach a legible copy of a valid form of identification (CA Drivers License, CA ID, etc.)
Sign and fax this request to (323) 980-5988. A callback verification will be performed on all requests.